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**NASPAA Site Visitor Training  
Workbook**

**NASPAA Accreditation Institute  
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**SERVING AS A SITE VISITOR**

* **Pre Visit Preparation** (http://accreditation.naspaa.org/resources/official-standards-policies/)
  + Review NASPAA Standards and corresponding videos: http://accreditation.naspaa.org/for-site-visitors/site-visitor-training/
  + Review Self-Study Instructions
  + Review Site Visit Manual
  + Review current COPRA Policies (Policy Statements)
  + Perform conflict of interest check when matched to program

* **Pre Visit Preparation, Program-specific in NASPAA Data Center** (naspaa.civicore.com)
  + Review Self-Study Report and appendices
  + Review Interim Report and program response
  + Connect with Chair on Responsibilities
    - Draft Preparatory Questions
    - Consider needed meetings, documents to review
  + Coordinate travel with team (and program)
    - Chair tasked with setting on-the-ground schedule
* **The Site Visit** (2.5 days on-the-ground)
  + Connect with team re: strategy, conduct
  + Faciliatate formative and collegial discussions with all stakeholders
  + Confirm and clarify, inquire; Do not judge or evaluate
  + Review evidence (source documents) related to program evaluatation, student learning assessment, mission, etc.: confirm processes, progress
  + Focus on public service values
  + Draft report findings
    - Document evidence and conversations related to Interim Report concerns
* **Site Visit Report**
  + Coordinate Report through the Site Visit Chair
  + Indicate concerns/no concerns, as supported by evidence
    - Make no final judgments
  + Respnd to COPRA concerns
    - Focus on evidence, what was reviewed, discussed, observed, not pre-judgment
  + Review (all) accreditation standards
  + Report through NASPAA Data Center
* **Chair Responsibilities**
  + Contact COPRA Liaison
    - Understand goals of visit
  + Work with Program Representative to arrange schedule and secure stakeholder meetings and documents
    - Communicate goals and role of visit
  + Assign the workload for the visit appropriately with the team
  + Direct the onsite meetings, including the exit interview, making sure attention is given to COPRA priorities
    - Introduce team and purpose for the visit and each meeting
  + Coordinate site visit report
    - Notify program of draft and finalize report post-program review

**CASE QUESTIONS**

Using the Example Interim Report below, review the Program’s Mission Statement and Items 1, 2, and 3. After you have reviewed each item, **divide the items at the table** and consider the following questions. Once you have completed, discuss the items as a group and share your responses.

1. What are the strengths of the mission statement provided in relation to the Standards? What are the weaknesses?
2. Why did COPRA raise these issues?
3. During the Site Visit, who would you want to meet with to address COPRA’s Interim Report concerns? What questions might you ask them?
4. What supporting documentation might you need to see to explore the issues raised in the interim report and provide evidence back to COPRA?

EXAMPLE INTERIM REPORT

**Commission on Peer Review and Accreditation**

**Interim Report to the**

**Master of Public Administration Program  
NASPAA University**

November 23, 2017

The Commission on Peer Review and Accreditation has reviewed the Self Study Report (SSR) for the Master of Public Administration (MPA) Program at NASPAA University. The Commission commends the program for strengths evident in the Self-Study Report and requests further information on the following point for its review. If the program proceeds to a site visit, particular attention should be paid to the items listed below. Please relate any responses to the program’s specific mission and goals.

Program Mission Statement (as reported in the SSR):

*The MPA Program seeks to develop diverse, ethical, and objective leaders for the public and nonprofit sectors. Our program seeks to advance innovation, accountability, transparency, and equity by graduating competent managers and analysts to lead across Virginia, fostering a commitment to public service, and supporting collaboration and best practice across public service organizations.*

**Item 1: Standard 1.1 – Mission Statement**

Standard 1.1 states, “The program will have a statement of mission that guides performance expectations and their evaluation, including:

* its purpose and public service values, given the program’s particular emphasis on public affairs, administration, and policy
* the population of students, employers, and professionals the program intends to serve, and
* the contributions it intends to produce to advance the knowledge, research, and practice of public affairs, administration, and policy.”

The Self Study Report indicates that the Alumni, Advisory Board, Employers, and Faculty are involved in the development of the mission statement. However, it is not clear how these stakeholders are involved (or will continue to be involved in its review):

“In preparation for the self-study report, a committee of the faculty reviewed the current mission statement and suggested adjustments to better reflect the program into which we have grown. Our advisory board, which includes former students, and the entire faculty reviewed the proposed new mission statement. The mission statement was ratified by the faculty in March 2016.”

The Commission expects accredited programs to define a mission that benefits, responds to, and impacts its community. Based on the narrative, it appears the program relied heavily on only one aspect of its community – faculty – to review the mission statement. The Commission requests additional information regarding the process that was used in the development, as well as expectations for the continued evaluation of the mission statement. The Commission requests that the Site Visit Team explore this issue with the program during the site visit, paying particular attention to ways in which the development and continued evaluation of the mission statement reflect the program’s community of internal and external stakeholders.

**Item 2: Standard 1.3 – Program Evaluation**

Standard 1.3 states, “The program will collect, apply, and report information about its performance and its operations to guide the evolution of the program’s mission and the program’s design and continuous improvement with respect to standards two through seven.”

Section 1.3.2 of the Self-Study Report states,

“…a significant percentage of our graduates (primarily pre-service students) do not find a job in either the public or non-profit sector immediately (about twenty to twenty-five percent in recent years). On the face of things, this is a troubling result vis-à-vis the intent of the program to train leaders in the public and non-profit sectors. However, this is mostly a geographical issue related to the lack of professionalization in our region and the unwillingness of many of our students (who are by and large first generation college students) to leave the immediate area to find a job...Many wind up in private sector management careers, especially in the area of healthcare. Our as-of-yet untested hypothesis is that, as our graduates slowly occupy ever more and ever more powerful roles in local and regional agencies, professionally trained managers will become the norm rather than the exception, thus transforming local governance and service provision.”

The Commission seeks evidence that accredited programs continuously improve, directing resources toward programmatic outcomes that align with their mission and public service values. Programs should define a mission and strategies for pursuing said mission, including processes for collecting and assessing information to evaluate progress toward its objectives. Based on the narrative shared above, it is unclear the extent to which the program is making evidence-based decisions in pursuit of its mission. The program has acknowledged student employment outcomes do not align with its mission, but it seems has yet to explore the issue and its impact deeper.

The Commission requests the program elaborate on the issues discussed above. How does the fact that a quarter of students ultimately find employment in the private, healthcare management impact the program’s mission? How has the program’s system of evaluation analyzed these circumstances? What opportunities exist to address the apparent mismatch? The Commission requests the Site Visit Team examine this nuance in the program’s employment data, specifically discussing with the program how it can evaluate this issue as well as how the program can facilitate its “untested hypothesis” and support professionalizing regional agencies.

**Item 3: Standard 4.3 – Support for Students**

Standard 4.3 states, “The program will ensure the availability of support services, such as curriculum advising, internship placement and supervision, career counseling, and job placement assistance to enable students to progress in careers in public affairs, administration, and policy.”

In Section 4.3.4 the Self-Study Report states, “All students without professional work experience (pre-service) are required to complete at least one internship during their course of study…in Spring 2015, 69% of graduating students had participated in an internship.”

The Commission seeks evidence that all students will have at least one experiential learning exercise and/or interaction with practitioners to ensure that students learn to apply their education. Internship participation should align with the program’s mission.

The Commission requests a fuller description of how the program defines professional work experience and clarification of the exemptions granted to the 31% of students who did not complete an internship. Elsewhere in the self-study report the program (in the self-study year) enrolled significantly more preservice students than in-service. Does the program typically waive internships for some students classified as preservice? Were these students required to have work experience specific to the field of public policy or would any post-baccalaureate work would suffice?

Further, related to the discussion in Item 2, the Commission requests the Site Visit Team explore with the program how the its internship participation and opportunities align with its mission to develop public and nonprofit leaders.

**Item 4: Standard 5.1 – Universal Required Competencies**

Standard 5.1 states, "As the basis for its curriculum, the program will adopt a set of required competencies related to its mission and to public service values. The required competencies will include five domains: the ability

* to lead and manage in public governance;
* to participate in and contribute to the public policy process
* to analyze, synthesize, think critically, solve problems and make decisions;
* to articulate and apply a public service perspective;
* to communicate and interact productively with a diverse and changing workforce and citizenry.”

The program in its SSR has chosen to elaborate on its assessment of the universal competency “to communicate and interact productively with a diverse and changing workforce and citizenry.”

The program operationally defined the competency as the ability to:

* organize, develop, and communicate complex ideas in a clear and logical manner, both orally and written
* listen effectively to diverse viewpoints
* understand the impact of diversity on successful communication
* adapt to cultural interactions and dynamics
* recognize the importance of cultural aptitude in the delivery of public services
* develop service delivery which reflects cultural sensitivity

The Self-Study Report states that

The program has referred to the Martin and Vaughn (2007) definition of cultural competency in defining learning outcomes: ‘Cultural competence refers to an ability to interact effectively with people of different cultures, particularly in the context of human resources, non-profit organizations, and government agencies whose employees work with persons from different cultural/ethnic backgrounds. Cultural competence comprises four components: (a) Awareness of one's own cultural worldview, (b) Attitude towards cultural differences, (c) Knowledge of different cultural practices and worldviews, and (d) cross-cultural skills. Developing cultural competence results in an ability to understand, communicate with, and effectively interact with people across cultures.’”

The program further states that it uses the Capstone courses and papers and a student exit survey as its artifacts for measuring student learning outcomes. However, the program does not elaborate on why these measures were chosen and how they specifically relate to the student learning outcomes expected of the students. Further, the program is unclear regarding its full approach to assessment, including how these measures were analyzed and what the causes were for determining that “during the Self-Study year the Assessment Committee determined that cultural competency is not adequately addressed in the current curriculum.”

The Commission seeks evidence of systematic assessment of student learning to demonstrate the program is taking action to ensure the attainment of, and improve performance with respect to, student competency across the entire curriculum.

The Commission requests the program provide further information on: why the Capstone projects and exit survey were chosen as measures; how they specifically relate to the student learning outcomes defined by the program for the chosen cultural universal competency; and the systematic process by which the faculty analyzed these measures to determine areas for programmatic improvement. Specifically, how did the program determine the inadequacy of the cultural competency learning outcomes and how does it plan to address this?

**SCENARIOS**

**On-the-Ground Conduct**

1. **At a meeting of students assembled at the team’s request by the Program Administrator, the student comments are uniformly positive praising the program for its strengths.**
2. The Interim Report indicates the Program submitted no diversity plan. The Program has a diverse student body.
3. Key members of the nucleus faculty are not available during the site visit.
4. **At a meeting with students, another member of the Site Visit Team begins to lecture about public service values.**
5. At a meeting with the program chair, a member of the Site Visit Team begins talking about the value of the Site Visit Team member’s home program’s approach to curriculum design. What do you do?
6. The program offers courses online, moving toward offering its entire degree online. How can the team review compliance?
7. **Program faculty are resisting developing student learning assessment above and beyond grading students.**
8. The Program is notably lacking in obvious student and faculty diversity. How can the team approach discussing the same topic with different programmatic stakeholders? For instance, if the program is struggling to articulate its climate of inclusiveness, how do you facilitate a conversation with students? Faculty? The provost?

**Site Visit Report**

1. **The Team has found evidence that the program has not met the expectations with regard to assessing the universal required competencies, as appropriate for its accreditation cohort. How does the Team communicate this in the Report? To the program in person?**
2. **The students indicate that they are dissatisfied with the level of internship and career support provided by the program. The alumni echo this concern.**
3. The Team believes the program is doing an excellent job with regard to student support. Likewise, the Team thinks there are large opportunities to improve faculty support. How does the Team communicate this in the Report? To the Program in person?
4. **As a Site Visitor, what if you have a concern with conformance to a standard not raised by COPRA? What do you do?**
5. As a Site Visitor, what if a concern from COPRA is not a concern for you? What do you do? How is it reported?